

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

RECEIVED

CENTRAL FAX CENTER

JUN 02 2008

**TRANSMITTAL
FORM**

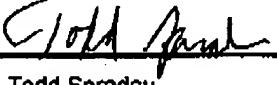
(to be used for all correspondence after initial filing)

Total Number of Pages In This Submission	14	Attorney Docket Number	CP215
--	----	------------------------	-------

ENCLOSURES (check all that apply)

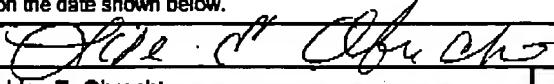
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	CEPHALON, INC.		
Signature			
Printed Name	Todd Spradau		
Date	June 2, 2008	Reg. No.	52,242

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature	
Typed or printed name	Lisa E. Obrecht
Date	June 2, 2008

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

DOCKET NO.: C215
Application No.: 09/975,350
Office Action Dated: April 2, 2008

RECEIVED
CENTRAL FAX CENTER PATENT
JUN 02 2008

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 09/975,350
Applicant : Martin J. Jacobs
Filing Date : October 11, 2001
Title : COMPOSITIONS COMPRISING MODAFINIL COMPOUNDS
TC/A.U. : 1618
Examiner : Blessing M. Fubara

DATE OF SUBMISSION: June 2, 2008

Mail Stop – AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REPLY PURSUANT TO 37 C.F.R. § 1.116

SIR:

In response to the final Office Action dated April 2, 2008 with a shortened statutory period for reply of three (3) months, reconsideration is respectfully requested in view of the enclosed remarks. The Commissioner is authorized to charge any required fees or credit any overpayments under 37 C.F.R. §1.16 or §1.17 to Deposit Account No. 03-1195.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 11 of this paper.